

DEGREE APPLICATION

Registrar's OfficeMaria College, 700 New Scotland Avenue, Albany, NY 12208, Phone 518-438-3111, Fax 518-730-9623

Fill in all information requested and return to the Registrar by the deadline for the semester in which you intend to graduate. Degree/Certificate candidates must be registered for the semester in which they will graduate.

CAREFULLY PRINT YOUR NAME AS YOU WANT IT TO APPEAR ON YOUR DIPLOMA

Full Legal Name for Diploma:				
(Given)	First Name)	(Middle Name/Initial	l) (Last Nam	e) (Suffix – e.g. Jr.
Student ID Number:				
Circle Degree: B.A. (Bachelor of Arts)	· ·	•	S. (Associate in Ap	plied Science)
A.A. (Associate in Arts)	A.S. (Associ	iate in Science)		
Curriculum Code: (Major Code: See co	odes on rever	rse side.)		-
Certificate 1:		Certificate 2:		
Date of Graduation: AugustYEA	D	ecember	May	
YEA	₹	YEAI	R	YEAR
ADDRESS GOOD FOR 3	MONTHS A	AFTER GRADUAT	TION (FOR MA	ILING DIPLOMA)
Address:				
City:		State:	Zip	Code:
Are you transferring any courses in yo	our final sen	nester? Yes No		
If yes, from where?				
May graduates, are you planning to a	tend the cor	nmencement ceren	nony? Yes	No
Present Address:				
Phone:		Email:		@mariacollege.edu
If you are receiving another Maria Colle	ge degree/ce	rtificate this term in	lease indicate held	ow.
Degree:		C	icase maicate bell	, yy .

NOTE: You must file a separate Degree Application Form for each degree.

Curriculum Codes

BLA	Liberal Arts	LA	Liberal Arts
PSY	Psychology	LAE	Liberal Arts (Conc. English)
BSN	Nursing (BS Completion Program)	LAP	Liberal Arts (Conc. Psychology)
HCM	Healthcare Management	LAR	Liberal Arts (Conc. Religious
			Studies/Philosophy)
HOS	Health & Occupational Sciences	NUR	Nursing
		OTA	Occupational Therapy Assistant

<u>CERTIFICATE</u> Curriculum Codes

BER	Bereavement Studies	PNC	Practical Nurse (LPN Training)
GRN	Gerontology		